



Office of Training
and Certification

New Jersey Division of Fire Safety

BASIC PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet #

HMT-9

Certification title

Hazardous Material Technician

Applicant Information

Candidate name

DFS ID #

Course #

Evaluation

Standard:

NFPA 470 2022 edition
11.2.2

Task

Demonstrate proper use of colorimetric tubes to identify hazards.

Conditions and Outcome

Provided with colorimetric tubes and a sample, the candidate shall select the proper tube and demonstrate a sampling of a material. Competency is demonstrated by performing all steps correctly and in the proper order.

Number	Task Steps	First Test		Retest #1		Retest #2	
		Pass	Fail	Pass	Fail	Pass	Fail
1	Use the manufacturer's instructions manual to select the proper colorimetric tube for sampling and check expiration dates for the tube.						
2	Gathers all equipment as needed: ,						
3	Reviews directions for use of a specific tube to include: pump strokes, tube cross sensitivity, and expected reactions and any color changes within the selected tubes.						
4	Performs pump test as specified by the manufacturer to ensure there are no leaks.						
5	Properly break both ends off of the tube(s) using the provided tube cutter.						
6	Insert the tube into the hand pump in the proper direction.						
7	Hold the tip of the tube an appropriate distance away from the sample taking care not to come into contact with any solid or liquid product.						
8	Sample the product based on manufacturer's instructions.						
9	Remove the tube from the pump and read, interpret, and record the results per manufacturer's instructions.						
10	Dispose of sampling tube in accordance with appropriate regulations.						
11	Decontaminate equipment and return to operational state per manufacturer's instructions.						
12	Complete required reports and supporting documentation.						
Final Test Result for Entire Task							

Evaluator signature & comments, Test #1		Evaluator signature & comments, Retest #1		Evaluator signature & comments, Retest #2	
Evaluator signature	Date	Evaluator signature	Date	Evaluator signature	Date
Candidate signature & acknowledgement,		Candidate signature & acknowledgement,		Candidate signature & acknowledgement,	

Test #1		Retest #1		Retest #1	
By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments		By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments		By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments	
Candidate signature	Date	Candidate signature	Date	Candidate signature	Date

Form DFS-HMT-SS-9

Approved by NJSME Committee 02/27/19

Revised by NJSME Committee 01/06/2023